Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Matthew First name E Middle name Grega Last name and Suffix (Sr., Jr., II, III)	-	First name M Middle name Grega Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4534		xxx-xx-3542

Official Form 101

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		4903 Maplecrest Ave. Cleveland, OH 44134				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		County County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

	otor 1 otor 2	Matthew E Grega Joelyn M Grega				Ca	se number (if known)		
Par	t 2:	Tell the Court About	our Bankrup	cy Case					
7.	Banl		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	cnoc	osing to file under	Chapter 7						
			☐ Chapter 1	1					
			☐ Chapter 1	2					
			☐ Chapter 1	3					
8.	How	you will pay the fee	about h order. I	ow you may	pay. Typically, if you are pey is submitting your paym	aying the fee yours	rith the clerk's office in your local court for more details self, you may pay with cash, cashier's check, or money your attorney may pay with a credit card or check with		
					ee in installments. If you of stallments (Official Form 10		sign and attach the Application for Individuals to Pay		
			l reque but is n applies	st that my foot required to to your fami	ee be waived (You may re o, waive your fee, and may ly size and you are unable	quest this option or do so only if your i to pay the fee in in	nly if you are filing for Chapter 7. By law, a judge may, ncome is less than 150% of the official poverty line that stallments). If you choose this option, you must fill out Form 103B) and file it with your petition.		
9.	bank	e you filed for cruptcy within the 8 years?	■ No.						
			Di	strict	W	hen	Case number		
			Di	strict	W	/hen	Case number		
			Di	strict	W	/hen	Case number		
10.		any bankruptcy es pending or being	■ No						
	filed not f you,	by a spouse who is illing this case with or by a business ner, or by an	☐ Yes.						
			De	ebtor			Relationship to you		
			Di	strict	V	/hen	Case number, if known		
			De	ebtor			Relationship to you		
			Di	strict	V	/hen	Case number, if known		

11. Do you rent your residence?

Go to line 12.

No. Go to line 12.

this bankruptcy petition.

■ No.

☐ Yes.

Has your landlord obtained an eviction judgment against you?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

Debt Debt	•				Case number (if known)		
Part	3: Report About Any Bu	sinesses `	You Own as a	Sole Proprie	etor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No. Go to Part 4.					
		☐ Yes.	Yes. Name and location of business				
	A sole proprietorship is a business you operate as		Name of hu	ısiness, if any			
	an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.						
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, St	reet, City, Sta	ate & ZIP Code		
	it to this petition.				ox to describe your business:		
			-		iness (as defined in 11 U.S.C. § 101(27A))		
				-	al Estate (as defined in 11 U.S.C. § 101(51B))		
			_	,	defined in 11 U.S.C. § 101(53A))		
			-	•	er (as defined in 11 U.S.C. § 101(6))		
			☐ Non	ne of the abov	/e		
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business If you are filing under Chapter 11, the court must know whether you are a small business debtor so deadlines. If you indicate that you are a small business debtor, you must attach your most recent bat operations, cash-flow statement, and federal income tax return or if any of these documents do not do in 11 U.S.C. 1116(1)(B).				a small business debtor, you must attach your most recent balance sheet, statement of			
	debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	■ No.	I am not filir	ng under Cha	pter 11.		
		□ No.	I am filing u Code.	ınder Chapter	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing u	ınder Chapter	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	4: Report if You Own or	Have Any	Hazardous Pr	roperty or Ar	ny Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat	☐ Yes.					
	of imminent and identifiable hazard to public health or safety?		What is the ha	azard?			
	Or do you own any		If immediate o	ttantian ia			
	property that needs immediate attention?		If immediate a needed, why is				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the p	property?			
	- ·				Number, Street, City, State & Zip Code		

Debtor 1 Matthew E Grega
Debtor 2 Joelyn M Grega

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb Deb	tor 1 Matthew E Grega tor 2 Joelyn M Grega				Case numbe	「 (if known)	
Part	6: Answer These Questi	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily condition individual primarily for a pers			ned in 11 U.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily b money for a business or inve				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you o	owe that are not consum	ner debts or busines	s debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. are paid that funds will be av			erty is excluded and administrative expenses	
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		■ No □ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,00		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000	
19.	How much do you estimate your assets to be worth?	□ \$100,	550,000 101 - \$100,000 1001 - \$500,000 1001 - \$1 million	\$1,000,001 - \$10,000,001 \$50,000,001 \$100,000,000	- \$50 million - \$100 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion	
20.	How much do you estimate your liabilities to be?	\$ 100,	550,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - □ \$10,000,001 □ \$50,000,001 □ \$100,000,00	- \$50 million - \$100 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion	
Part	7: Sign Below						
For	you	I have ex	camined this petition, and I de	clare under penalty of p	erjury that the inform	nation provided is true and correct.	
						under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.	
			rney represents me and I did int, I have obtained and read th			t an attorney to help me fill out this	
		I request	relief in accordance with the	chapter of title 11, Unite	ed States Code, spec	cified in this petition.	
			cy case can result in fines up			r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519	
		/s/ Matt	hew E Grega		/s/ Joelyn M Gre		
			w E Grega e of Debtor 1		Joelyn M Grega Signature of Debtor		

Executed on July 25, 2019 MM / DD / YYYY Executed on July 25, 2019 MM / DD / YYYY

Debtor 1	Matthew E Grega		
Debtor 2	Joelyn M Grega	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Peter A. Russell	Date	July 25, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Peter A. Russell 0062208		
Printed name		
Law Office of Peter A. Russell		
Firm name		
10950 Pearl Road, Suite A-2		
Strongsville, OH 44136		
Number, Street, City, State & ZIP Code		
Contact phone 440.572.2100	Email address	p.russell@sbcglobal.net
0062208 OH		
Bar number & State		

Debto	r 1 Matthew E Grega	1			
	First Name	Middle Name	Last Name		
Debto	r 2 Joelyn M Grega e if, filing) First Name	Middle Name	Last Name		
	. 6,				
Unite	d States Bankruptcy Court for the:	NORTHERN DISTRICT	Γ OF OHIO		
Case	number				
(if know	n)			_	k if this is an
				amen	ded filing
Sum Be as	complete and accurate as possib	ble. If two married people	nd Certain Statistical Information e are filing together, both are equally responsible for	or supplyin	
our c	riginal forms, you must fill out a		he information on this form. If you are filing amend k the box at the top of this page.	ed schedu	lles after you file
Part 1	Summarize Your Assets				
				Your a	ssets of what you own
	Schedule A/B: Property (Official F a. Copy line 55, Total real estate, f			\$	83,600.00
,	b. Copy line 62, Total personal pro	perty, from Schedule A/B.		\$	13,838.00
•	c. Copy line 63, Total of all propert	y on Schedule A/B		\$	97,438.00
Part 2	Summarize Your Liabilities				
					abilities t you owe
	Schedule D: Creditors Who Have C 2a. Copy the total you listed in Colu		y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	110,578.54
3. 3	Schedule E/F: Creditors Who Have Ba. Copy the total claims from Part	Unsecured Claims (Official 1 (priority unsecured claim	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	0.00
3	Bb. Copy the total claims from Part	2 (nonpriority unsecured of	claims) from line 6j of Schedule E/F	\$	139,745.31
			Your total liabilities	\$	250,323.85
Part 3	: Summarize Your Income and	d Expenses			
	Schedule I: Your Income (Official Fo Copy your combined monthly incom		e /	\$	3,933.82
	Schedule J: Your Expenses (Officia Copy your monthly expenses from I			\$	5,090.00
Part 4	: Answer These Questions for	Administrative and Stat	istical Records		
	Are you filing for bankruptcy und	er Chanters 7 11 or 137	,		
6		•	Check this box and submit this form to the court with yo	ur other sch	hedules.
]]	■ Yes What kind of debt do you have?				

the court with your other schedules.

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Official Form 106Sum

page 1 of 2

Best Case Bankruptcy

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Debtor 1	Matthew E Grega
Debtor 2	Joelyn M Grega

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,510.16

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	28,070.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	28,070.00

Debtor 1	Ма	tthew E Gre	ga						
		Name		Name	Last	Name			
ebtor 2 spouse, if fil		elyn M Grega Name		e Name	Last	Name			
nited Sta	ates Bankrupt	cy Court for the	: NORTHER	N DIST	RICT OF OHIO				
ase num	nber							[☐ Check if this is a amended filing
che		/B: Pro	<u>. , , , , , , , , , , , , , , , , , , ,</u>			set fits in more than on			12/15
o you o					dence, building, land,	Have an Interest In or similar property?			
- □ No. G -		y legal or equita							
□ No. G ■ Yes.	own or have an	y legal or equita		any resid	dence, building, land,	or similar property?	Do not doduce	et socured clair	me or exemptions. But
□ No. G ■ Yes. 1 4903	own or have an Go to Part 2. Where is the pro	y legal or equita	able interest in a	any resid	t is the property? Che Single-family home Duplex or multi-unit	or similar property?	the amount of	of any secured	ns or exemptions. Put claims on <i>Schedule D:</i> s <i>Secured by Property.</i>
No. G Yes. 1 4903 Street	own or have an Go to Part 2. Where is the pro	y legal or equitation operty? St Ave. lele, or other description of the description of t	able interest in a	what	t is the property? Che Single-family home Duplex or multi-unit Condominium or cod Manufactured or mo	or similar property? eck all that apply building operative obile home	the amount of Creditors Who	of any secured of the Claims lie of the left;	claims on Schedule D: s Secured by Property. Current value of the portion you own?
No. G Yes. 1 490: Street	own or have an Go to Part 2. Where is the pro Maplecres taddress, if availab	y legal or equita operty? ot Ave.	able interest in a	What	t is the property? Che Single-family home Duplex or multi-unit Condominium or cod Manufactured or mo Land Investment property Timeshare	or similar property? eck all that apply building operative bbile home	Current valuentire prope \$83 Describe the (such as fee a life estate)	of any secured on Have Claims the of the city? a,600.00 a rature of you simple, tenar, if known.	claims on Schedule D: s Secured by Property. Current value of the
No. G Yes. 1 4903 Street	own or have an Go to Part 2. Where is the pro 3 Maplecres t address, if availab	y legal or equitation operty? St Ave. lele, or other description of the description of t	able interest in a	What	t is the property? Che Single-family home Duplex or multi-unit Condominium or coo Manufactured or mo Land Investment property Timeshare Other has an interest in the	or similar property? eck all that apply building operative bbile home	Current valuentire prope \$83 Describe the (such as fee	of any secured on Have Claims the of the city? a,600.00 a rature of you simple, tenar, if known.	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$83,600.0 ur ownership interest
No. G Yes. 1 4903 Street	own or have an Go to Part 2. Where is the prosection of the prose	y legal or equitation operty? St Ave. lele, or other description of the description of t	able interest in a	What	t is the property? Che Single-family home Duplex or multi-unit Condominium or cod Manufactured or mo Land Investment property Timeshare Other has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor	or similar property? ack all that apply building operative bille home r 2 only	Current valuentire prope \$83 Describe the (such as fee a life estate) Fee simple	of any secured on Have Claims the of the orty? 3,600.00 a nature of you is simple, tenard, if known. le	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$83,600.0 ur ownership interest
No. G Yes. 1 4903 Street Clev City	own or have an Go to Part 2. Where is the prosection of the prose	y legal or equitation operty? St Ave. lele, or other description of the description of t	able interest in a	What	t is the property? Che Single-family home Duplex or multi-unit Condominium or cod Manufactured or mo Land Investment property Timeshare Other has an interest in the Debtor 1 only Debtor 2 only Least one of the d	or similar property? cock all that apply building operative bible home r 2 only lebtors and another sh to add about this ite	Current valuentire prope \$83 Describe the (such as fee a life estate) Fee simple	of any secured on Have Claims the of the larty? 3,600.00 a nature of you simple, tenard, if known. Ile If this is communications)	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$83,600.0 ur ownership interest acy by the entireties, co

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debto		Matthew E G Joelyn M Gro	•		Case number (if known)	
3. Ca	rs, vans	, trucks, tract	ors, sport utility ve	hicles, motorcycles		
	No					
•	Yes					
3.1	Make:	Mitsubish	ni	Who has an interest in the property? Check one		claims or exemptions. Put
	Model:	Outlande	r	Debtor 1 only		red claims on Schedule D: aims Secured by Property.
	Year:	2010		Debtor 2 only	Current value of the	Current value of the
	Approxi	mate mileage:	107,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:		\square At least one of the debtors and another		
					\$5,519.00	¢5 510 00
				☐ Check if this is community property (see instructions)	φ3,319.00 ———————————————————————————————————	\$5,519.00
2.2	Makai	Hyundai		Who has an interest in the preparty? Object	Do not deduct secured	claims or exemptions. Put
3.2	Make:	Veloster		Who has an interest in the property? Check one	the amount of any secu	red claims on Schedule D:
	Model: Year:	2014		Debtor 1 only		aims Secured by Property.
		mate mileage:	130,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		formation:		☐ At least one of the debtors and another	onino proporty :	portion you out
				☐ Check if this is community property	\$4,948.00	\$4,948.00
				(see instructions)		
					Do not doduct socured	claims or exemptions. Put
3.3	Make:	Hyundai		Who has an interest in the property? Check one	the amount of any secu	red claims on Schedule D:
	Model:	Sonata		Debtor 1 only	Creditors Who Have Cl	aims Secured by Property.
	Year:	2010		Debtor 2 only	Current value of the	Current value of the
		mate mileage: formation:		Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Othern	iioimation.		At least one of the debtors and another		
				Check if this is community property (see instructions)	\$2,000.00	\$2,000.00
				(see instructions)		
Exa ■ I	mples: I			d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcycles,		
				n for all of your entries from Part 2, including that number here		\$12,467.00
Dort 2	Dagas	iha Vaur Daraa	and and Harrachald Ma			
Part 3			nal and Household Ite egal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i> >	<i>amples:</i> No	I goods and for Major applian	urnishings ces, furniture, linens	, china, kitchenware		
			Used furniture of	of debtors		\$750.00

Official Form 106A/B Schedule A/B: Property

page 2

	ebtor 1 ebtor 2	Matthew E Grega Joelyn M Grega	Case number (if known)	
7.	_	nics es: Televisions and radios; audio, video, stereo, and digital equipment; computers, including cell phones, cameras, media players, games	printers, scanners; music co	ollections; electronic devices
	■ No □ Yes.	Describe		
8.	Example _	bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other collections, memorabilia, collectibles	ner art objects; stamp, coin,	or baseball card collections;
	■ No □ Yes.	Describe		
9.	Example _	ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pool table musical instruments	es, golf clubs, skis; canoes a	and kayaks; carpentry tools;
	■ No □ Yes.	Describe		
10.	. Firearm Examp	ns oles: Pistols, rifles, shotguns, ammunition, and related equipment		
	■ No □ Yes.	Describe		
11.	□ No	s bles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe		
	— 163.	Used clothing of debtors		\$500.00
12.	. Jewelry Examp ■ No	y oles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloor	n jewelry, watches, gems, g	old, silver
	☐ Yes.	Describe		
13.		rm animals oles: Dogs, cats, birds, horses		
	_	Describe		
14.	■ No	her personal and household items you did not already list, including any heal	th aids you did not list	
	☐ Yes.	Give specific information	_	
15		he dollar value of all of your entries from Part 3, including any entries for pagart 3. Write that number here	es you have attached	\$1,250.00
Pa	art 4: Des	scribe Your Financial Assets	-	
		vn or have any legal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No	oles: Money you have in your wallet, in your home, in a safe deposit box, and on ha	nd when you file your petitic	on
			Cash	\$1.00

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1 Debtor 2	Joelyn M Grega		Case number (if known)	
•			counts; certificates of deposit; shares in credit unions, brokerage houses, and o s with the same institution, list each.	ther similar
			Institution name:	
	17.1	. Savings	PNC Bank Acct. 1439	\$0.00
	17.2	. Checking	PNC Bank Acct. 1404	\$120.00
	17.3	c. Checking	PNC Bank Acct. 1412	\$0.00
	s, mutual funds, or publiples: Bond funds, investr		rokerage firms, money market accounts	
■ No □ Yes		Institution or issuer	rname:	
19. Non- p		d interests in incorp	porated and unincorporated businesses, including an interest in an LLC, μ	partnership, and
■ No	. Give specific information	n about themame of entity:	 % of ownership:	
Nego Non-i ■ No	tiable instruments include negotiable instruments ar . Give specific information	e personal checks, ca e those you cannot tr	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	ement or pension account ples: Interests in IRA, EF		403(b), thrift savings accounts, or other pension or profit-sharing plans	
	. List each account separ Type	ately. e of account:	Institution name:	
Your Exam		sits you have made s	o that you may continue service or use from a company , public utilities (electric, gas, water), telecommunications companies, or others	
■ No □ Yes			Institution name or individual:	
23. Annu i ■ No	ities (A contract for a per	iodic payment of mon	ney to you, either for life or for a number of years)	
	Issuer na	me and description.		
26 U.S	sts in an education IRA, 5.C. §§ 530(b)(1), 529A(b)		qualified ABLE program, or under a qualified state tuition program.	
■ No □ Yes	Institution	name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	
■ No	s, equitable or future int		other than anything listed in line 1), and rights or powers exercisable for y	our benefit
26. Paten	ts, copyrights, tradema	rks, trade secrets, a	nd other intellectual property	
■ No	•		eds from royalties and licensing agreements	
	. Give specific information 106A/B	n about them	Schedule A/B: Property	page

Best Case Bankruptcy

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	ebtor 1 ebtor 2	Matthew E Grega Joelyn M Grega		Case number (if known)	
27.		es, franchises, and other ger les: Building permits, exclusive		tion holdings, liquor licenses, professional licens	ees
		Give specific information abou	ut them		
M	oney or p	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu ■ No	unds owed to you			
		Give specific information abou	t them, including whether you a	lready filed the returns and the tax years	
29.	■ No		nony, spousal support, child su	pport, maintenance, divorce settlement, property	settlement
30.	Examp. □ No	benefits; unpaid loans you	nsurance payments, disability b	enefits, sick pay, vacation pay, workers' compe	nsation, Social Security
	Yes.	Give specific information			
			Co-debtor is owed pens from former husband	ion (defined benefit plan) via QDRO	Unknown
31.		s in insurance policies les: Health, disability, or life in:	surance; health savings accour	nt (HSA); credit, homeowner's, or renter's insura	nce
	■ No	dana da Carana	of an above Paris and Pat Standard		
	⊔ Yes. r		of each policy and list its value ny name:	Beneficiary:	Surrender or refund value:
32.	If you a someon No		you from someone who has ust, expect proceeds from a life	died insurance policy, or are currently entitled to rec	eive property because
33.	Examp. ■ No		er or not you have filed a law sputes, insurance claims, or rig	suit or made a demand for payment hts to sue	
34.	Other c		claims of every nature, includ	ling counterclaims of the debtor and rights to	set off claims
	■ No □ Yes.	Describe each claim			
35.	■ No	ancial assets you did not alr	ready list		
	⊔ Yes.	Give specific information			
36					
	for Pa			g any entries for pages you have attached	\$121.00

Official Form 106A/B Schedule A/B: Property page 5
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Best Case Bankruptcy

Debtor 1 Debtor 2	Matthew E Grega Joelyn M Grega		Case number (if known)	
37. Do you	own or have any legal or equitable interest in any business-relate	ed property?		
■ No. G	Go to Part 6.			
☐ Yes.	Go to line 38.			
	escribe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. Do yo	ou own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
■ No	o. Go to Part 7.			
☐ Ye	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
Exam ■ No	to have other property of any kind you did not already list apples: Season tickets, country club membership B. Give specific information	?		
54. Add	the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Part	1: Total real estate, line 2		<u> </u>	\$83,600.00
56. Part	2: Total vehicles, line 5	\$12,467.00		
	3: Total personal and household items, line 15	\$1,250.00		
	4: Total financial assets, line 36	\$121.00		
	5: Total business-related property, line 45	\$0.00		
	6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part	7: Total other property not listed, line 54 +	\$0.00		
62. Tota	al personal property. Add lines 56 through 61	\$13,838.00	Copy personal property total	\$13,838.00
63. Tota	al of all property on Schedule A/B. Add line 55 + line 62			\$97.438.00

Official Form 106A/B Schedule A/B: Property page 6

Tax District #: 3250

Grantee: GREGA, MATTHEW E.
Balance Assumed: \$ 0.00
Total Consideration: \$ 87,000.00
Conv. Fee Paid: \$ 349.00
Transfer Fee Paid: \$ 0.50
Fee Paid by: Newman Title
Exempt Code:

Tax List Year: 2018
Land Use Code: 5100
Land Value: 13,800
Building Value: 65,900
Total Value: 79,700
Arms Length Sale: UNKNW
Rcpt: A-04152018-8
Inst #: 747868
Check #: 63540

Cuyahoga County Fiscal Officer

GENERAL WARRANTY DEED

Ohio Revised Code §5302.05

Know All Persons By These Presents:

That, I, Janine Janos htta Janine Greene (Unmarried), the Granter, for valuable consideration paid, received to my full satisfaction, do hereby give, grant, bargain, sell and convey, with general warranty covenants, to Matthew E. Grega, the Grantee, whose tax mailing address will be 4903 Maplecrest Avenue, Parma, Ohio 44134, the following described Real Broperty:

Situated in the City of Parma, County of Cuyahoga and State of Ohio:

And known as Sublot No. 102 in the Bingham-Priest Company's Ramona Heights Subdivision No. 2 of part of Original Parma Township, Lot No. 11, Blake Tract, as shown by the recorded plat in Volume 73 of Maps, Page 27 of Cuyahoga County Records, be the same more or less, but subject to all legal highways.

Permanent Parcel Number: 447-07-085

Property Address: 4903 Maplecrest Avenue, Parma, Ohio 44134 Prior Instrument Reference: Instrument Number 199811300827

To have and to hold the above granted and bargained premises, with the appurtenances thereunto belonging, unto the said Grantee, Grantee's heirs and assigns forever.

Amb, I, Janine Janos, the said Grantor, do for myself and my heirs, executors and administrators, covenant with the said Grantee, Grantee's heirs and assigns, that at and until the ensealing of these presents, I am well seized of the above described premises, as a good and indefeasible estate in fee simple, and have good right to bargain and sell the same in manner and form as above written, and that the same are free from all encumbrances whatsoever, excepting from said covenants all conditions and restrictions of record, reservations, easements (however created), encroachments that do not materially affect the use or value of the property, zoning ordinances, if any, and taxes and assessments, both general and special, which are a lien on the property but not yet due and payable, and that I will warrant and defend said premises, with the appurtenances thereunto belonging, to the said Grantee, Grantee's heirs and assigns, against all lawful claims and demands whatsoever.

Fill in this inform	mation to identify your	case:		
Debtor 1	Matthew E Grega			
	First Name	Middle Name	Last Name	
Debtor 2	Joelyn M Grega			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemp	ptions are	you claiming?	Check one only	. even if	vour spouse i	s filina with	vou.
----	--------------------	------------	---------------	----------------	-----------	---------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
\$83,600.00		\$3,678.44	Ohio Rev. Code Ann. § 2329.66(A)(1)
		100% of fair market value, up to any applicable statutory limit	
\$750.00		\$750.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
		100% of fair market value, up to any applicable statutory limit	2020.00(//)(4)(d)
\$500.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
		100% of fair market value, up to any applicable statutory limit	2020:00(/-)(4)(4)
\$1.00		\$1.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
		100% of fair market value, up to any applicable statutory limit	
\$120.00		\$120.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
		100% of fair market value, up to any applicable statutory limit	
	\$83,600.00 \$750.00 \$1.00	\$750.00 \$1.0	\$83,600.00 \$\$3,678.44 \$\$750.00 \$\$750.00 \$\$100% of fair market value, up to any applicable statutory limit \$\$500.00 \$\$100% of fair market value, up to any applicable statutory limit \$\$1.00 \$\$

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debtor 1 Debtor 2	Matthew E Grega Joelyn M Grega			Case number (if known	
	description of the property and line on dule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	debtor is owed pension (defined efit plan) via QDRO from former	Unknown		\$0.00	Ohio Rev. Code Ann. § 742.47
husl	pand from Schedule A/B: 30.1			100% of fair market value, up to any applicable statutory limit	
(Sub	you claiming a homestead exemption ect to adjustment on 4/01/22 and every No			ed on or after the date of adjustme	nt.)
	Yes. Did you acquire the property covered No	ed by the exemption wi	ithin 1	215 days before you filed this case	?

Official Form 106C

☐ Yes

Schedule C: The Property You Claim as Exempt

page 2 of 2

Fill in this informa	ation to identify you	r case:			
Debtor 1	Matthew E Greg	a			
	First Name	Middle Name Last Name		-	
Debtor 2	Joelyn M Grega				
(Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT OF OHIO		-	
Case number					
(if known)				☐ Check	if this is an
				amend	ded filing
000 1 1 5	4000				
Official Form					
Schedule [D: Creditors	Who Have Claims Secure	d by Propert	У	12/15
Be as complete and	accurate as nossible. If	f two married people are filing together, both are e	qually responsible for si	unnlying correct informa	tion If more space
		out, number the entries, and attach it to this form.			
1. Do any creditors h	nave claims secured by	your property?			
	_	is form to the court with your other schedules.	You have nothing else t	to report on this form.	
_	all of the information b	•	. ou mare mening elect		
		elow.			
Part 1: List All	Secured Claims		. Column A	Column B	Column C
		nore than one secured claim, list the creditor separatel a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
		al order according to the creditor's name.	Do not deduct the	that supports this	portion
0.4 Dyrider Fin	anas IIC	Describe the property that accuracy the claims	value of collateral.	claim	If any
2.1 Byrider Fin	iance, LLC	Describe the property that secures the claim:	\$14,845.00	\$5,519.00	\$9,326.00
dba CNAC		2010 Mitsubishi Outlander 107,000 miles			
	ilton Crossing				
Blvd.	g	As of the date you file, the claim is: Check all that apply.			
Carmel, IN	46032	☐ Contingent			
Number, Street, 0	City, State & Zip Code	☐ Unliquidated			
		Disputed			
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage or se	ecured		
Debtor 2 only		car loan)			
■ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the	e debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim community deb		Other (including a right to offset)			

November,

Date debt was incurred 2018

Last 4 digits of account number

916

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 3

First Name Modes Name Last Name	Debtor 1	Matthew E Grega		Case number (if known)		
Credit Acceptance Corporation Credit Acceptance Corporation Credit Acceptance Corporation Credit Acceptance Corporation Credit Acceptance Credit A			ame Last Name			
Describe the property that secures the claim: 2010 Hyundai Sonata 25505 W. 12 Mile Road Southfield, Mil 48034 Number, Street, City, State & Zp Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check in this claim relates to a community debt Date debt was incurred Debtor 1 only Debtor 1 only Date of the debtor and better 2 only At least one of the debtors and another Check in this claim relates to a community debt Date of the debt was incurred Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only D	Debtor 2		anna Last Noma			
Corporation Describe the property that secures the claim: \$2,675.00 \$2,000.00 \$675.00		First Name ivilidate Na	ame Last Name			
Creditor's Name Contingent As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of Filen. Check all that apply. Contingent Unliquidated Disputed Nature of Filen. Check all that apply. Contingent Unliquidated Disputed Nature of Filen. Check all that apply. As agreement you made (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Contingent Statutory lien (including a right to offset) Contingent Statutory lien (including a right to offset) Contingent Statutory lien (including a right to offset) Statutory lien (including a right to o			Describe the property that secures the claim:	\$2.675.00	\$2.000.00	\$675.00
25505 W. 12 Mile Road Southfield, Mil 48034 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another community debt Date debt was incurred July, 2016 Credibirs Name Debtor 1 only Debtor 2 only At least one of the debtors and another Check it this claim relates to a community debt Date debt was incurred July, 2016 Last 4 digits of account number P.O. Box 630412 Cincinnati, OH 42563 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Date debt was incurred July, 2016 Last 4 digits of account number S79,921.56 \$83,600.00 \$0.0						• • • • • • • • • • • • • • • • • • • •
2530 W.1 Delto Place Number, Street, City, State & Zep Code Unliquidated Disputed			2010 Hydridai Oonata			
2530 W.1 Delto Place Number, Street, City, State & Zep Code Unliquidated Disputed			As of the date you file the claim is: Ob at all that			
Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 3 only Debtor 3 only Debtor 4 and Debtor 3 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 2 only Debtor 1 only Deb						
Who owes the debt? Check one. Debtor 1 only Debtor 2 only A latest one of the debtors and another community debt Date debt was incurred July, 2016 Application 1 on 1 one of the debtors and another community debt Date debt was incurred July, 2016 Last 4 digits of account number Describe the property that secures the claim: P.O. Box 630412 Cincinnati, OH 45263 Number, Street, City, State 8 Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 2 only An a greement you made (such as mortgage or secured carloan) Debtor 1 and Debtor 2 only An a greement you made (such as mortgage or secured carloan) Debtor 1 and Debtor 2 only An a greement you made (such as mortgage or secured carloan) Debtor 1 and Debtor 2 only An a greement you made (such as mortgage or secured carloan) Debtor 1 and Debtor 2 only An a greement you made (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only At least one of the debtors and another check if this claim relates to a community debt Date debt was incurred 2106 Last 4 digits of account number 5834 Describe the property that secures the claim: 2730 Liberty Ave. Pittsburgh, PA 15222 Number, Street, City, State 8 Zip Code Unliquidated Unliqui	So	uthfield, MI 48034				
Who owes the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred July, 2016 Last 4 digits of account number 2.3 Fifth Third Bank Describe the property that secures the claim: \$79,921.56 \$83,600.00 \$0.00 P.O. Box 630412 Cinclinnati, OH 45263 Number, Street, City, State & Zp Code Debtor 2 only Debtor 1 and Debtor 3 only At least one of the debtors and another Check if this claim relates to a community debt P.O. Box 630412 Cinclinnati, OH 45263 Number, Street, City, State & Zp Code Nature of lien. Check all that apply. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only At least one of the debtors and another Check in this claim relates to a community debt Date debt was incurred 2106 Last 4 digits of account number East 4 digits of account number Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Judgment lien from a laws	Num	ber, Street, City, State & Zip Code				
Debtor 1 only Debtor 2 only Debtor 3 only Debtor 3 only An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number Date debt was incurred P.O. Box 630412 Cincinnati, OH 45263 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Creditor's Name P.O. Box 630412 Cincinnati, OH 45263 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another check if this claim relates to a community debt Date debt was incurred 2106 Last 4 digits of account number Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Creditor's Name P.O. Bank Describe the property that secures the claim: Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Creditor's Name P.O. Bank Describe the property that secures the claim: Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Creditor's Name P.O. Bank Describe the property that secures the claim: Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Creditor's Name Date debt was incurred Describe the property that secures the claim: Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Describe the property that secures the claim: Statutory lien (such as tax lien, mechanic's lien) Date debt was incurred Date debt wa	Who owe	s the deht? Chack and	·			
Debtor 2 only Car loan Statutory len (such as tax lien, mechanic's lien) At least one of the debtors and another Other (including a right to offset) Other (including a right	_		_			
Debtor 1 and Debtor 2 only At least one of the debtors and another Creditor's Name Describe the property that secures the claim: P.O. Box 630412 Cincinnati, OH 45263 Number, Street, City, State & Zip Code Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Creditor's Name PARC Bank Describe the property that secures the claim: 4903 Maplecrest Ave. Cleveland, OH 44134 Cuyahoga Country PPN: 447-07-085 As of the date you file, the claim is: Check all that apply. At least one of the debtors and another Creditor's Name PARC Bank Describe the property that secures the claim: 4903 Maplecrest Ave. Cleveland, OH 44134 Cuyahoga Country PPN: 447-07-085 As of the date you file, the claim is: Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 2106 Last 4 digits of account number 5834 Describe the property that secures the claim: 2730 Liberty Ave. Pittsburgh, PA 15222 Number, Street, City, State & Zip Code North and Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply.		•		secured		
□ At least one of the debtors and another □ Other (including a right to offset) Date debt was incurred July, 2016 Last 4 digits of account number Creditor's Name Describe the property that secures the claim: \$79,921.56 \$83,600.00 \$0	_	•	_ ′			
Creditor's Name Describe the property that secures the claim: \$79,921.56 \$83,600.00 \$0.00 \$0.0	_					
Date debt was incurred July, 2016 Last 4 digits of account number Security Securi	_		_			
2.3 Fifth Third Bank Creditor's Name P.O. Box 630412 Cincinnati, OH 45263 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another community debt Check iff this claim relates to a community debt Date debt was incurred 2106 Last 4 digits of account number 5834 Z-4 PNC Bank Creditor's Name Describe the property that secures the claim: \$79,921.56 \$83,600.00 \$0.00 \$0.0						
2.3 Fifth Third Bank Creditor's Name P.O. Box 630412 Cincinnati, OH 45263 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another community debt Check iff this claim relates to a community debt Date debt was incurred 2106 Last 4 digits of account number 5834 Z-4 PNC Bank Creditor's Name Describe the property that secures the claim: \$79,921.56 \$83,600.00 \$0.00 \$0.0	Data dabt	was incorred July 2016	Look 4 digits of account number			
Creditor's Name 4903 Maplecrest Ave. Cleveland, OH 44134 Cuyahoga County PPN: 447-07-085 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. At least one of the debtors and another Check iff this claim relates to a community debt Date debt was incurred 2106 Last 4 digits of account number Creditor's Name 2730 Liberty Ave. Pittsburgh, PA 15222 Number, Street, City, State & Zip Code 4903 Maplecrest Ave. Cleveland, OH 44134 Cuyahoga County PPN: 447-07-085 As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. Contingent Unliquidated Describe the property that secures the claim: \$13,136.98 \$4,948.00 \$8,188.98	Date debt	was incurred July, 2016	Last 4 digits of account number			
Creditor's Name 4903 Maplecrest Ave. Cleveland, OH 44134 Cuyahoga County PPN: 447-07-085 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. At least one of the debtors and another Check iff this claim relates to a community debt Date debt was incurred 2106 Last 4 digits of account number Creditor's Name 2730 Liberty Ave. Pittsburgh, PA 15222 Number, Street, City, State & Zip Code 4903 Maplecrest Ave. Cleveland, OH 44134 Cuyahoga County PPN: 447-07-085 As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. Contingent Unliquidated Describe the property that secures the claim: \$13,136.98 \$4,948.00 \$8,188.98	2.3 Fift	th Third Bank	Describe the property that secures the claim:	\$79.921.56	\$83,600.00	\$0.00
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2.4 PNC Bank Creditor's Name 2730 Liberty Ave. Pittsburgh, PA 15222 Number, Street, City, State & Zip Code Describe the property that secures the claim: \$13,136.98 \$4,948.00 \$8,188.98 \$4,948.00 \$8,188.98	-					
Creditor's Name 2014 Hyundai Veloster 130,000 miles 2730 Liberty Ave. Pittsburgh, PA 15222 Number, Street, City, State & Zip Code 2014 Hyundai Veloster 130,000 miles As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	Date debt	was incurred 2106	Last 4 digits of account number 5834	<u> </u>		
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miles 2730 Liberty Ave. Pittsburgh, PA 15222 Number, Street, City, State & Zip Code miles As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated					Ψ 1,0 10.00	ψο,.σο.σο
Pittsburgh, PA 15222 Number, Street, City, State & Zip Code Dulliquidated			I '			
Pittsburgh, PA 15222 Number, Street, City, State & Zip Code Dulliquidated			As of the date you file the claim is: Check all the			
Number, Street, City, State & Zip Code Unliquidated						
☐ Disputed	Num	ber, Street, City, State & Zip Code				
Who owes the debt? Check one. Nature of lien. Check all that apply.	Who owo	us the deht? Cheek one	•			
	_		_			
☐ Debtor 1 only ☐ Debtor 2 only ☐ An agreement you made (such as mortgage or secured car loan)		•	, ,	secured		
■ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien)	_					
☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit	_		<u></u>			
☐ Check if this claim relates to a ☐ Other (including a right to offset)	_					
community debt			— Strict (moldding a right to onset)			
Date debt was incurred March, 2015 Last 4 digits of account number	Date dobt	was incurred March 2015	Last 4 digits of account number			

Official Form 106D

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Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Debtor 1	Matthew E Greg	ja –		Case number (if known)	
	First Name	Middle Name	Last Name		
Debtor 2	Joelyn M Grega				
	First Name	Middle Name	Last Name		
Add the	dollar value of your e	ntries in Column A on t	this page. Write that number here	s: \$110,578.54	
	the last page of your at number here:	form, add the dollar va	lue totals from all pages.	\$110,578.54	
Part 2:	List Others to Be N	otified for a Debt Th	at You Already Listed		
trying to than one	collect from you for a	debt you owe to somed debts that you listed in	one else, list the creditor in Part 1	nat you already listed in Part 1. For example, if a collection agency is , and then list the collection agency here. Similarly, if you have more ors here. If you do not have additional persons to be notified for any	
	me, Number, Street, Cit	y, State & Zip Code		On which line in Part 1 did you enter the creditor?	
	802 Hamilton Cro armel, IN 46032	essing	ı	Last 4 digits of account number	

Official Form 106D Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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Fill in this inf	ormation to identify your ca	ise:				
Debtor 1	Matthew E Grega					
Dobtor 2	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	Joelyn M Grega First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF (OHIO			
Case number						
(if known)	-					Check if this is an
						amended filing
Official Ec	orm 106E/F					
	E/F: Creditors Wh	o Havo Uneocuro	d Claime			12/15
	and accurate as possible. Use			Part 2 for craditors with	MONDDIODITY	
left. Attach the name and case	editors Who Have Claims Secu Continuation Page to this page number (if known). at All of Your PRIORITY Uns	If you have no information to I				
1. Do any cre	ditors have priority unsecured	claims against you?				
No. Go	to Part 2.					
☐ Yes.						
Part 2: Lis	t All of Your NONPRIORITY	Unsecured Claims				
	editors have nonpriority unsecu					
	ı have nothing to report in this par		th your other sch	edules.		
Yes.	3		,			
unsecured	your nonpriority unsecured clai claim, list the creditor separately the ditor holds a particular claim, list	or each claim. For each claim list	ed, identify what	ype of claim it is. Do not li	st claims already	included in Part 1. If more
r unt Z.						Total claim
4.1 ADS		Last 4 digits of a	count number	5637		\$413.00
•	iority Creditor's Name	When was the de	ht incurred?	Revolving		
_	mbus, OH 43218	When was the de	bt incurred.	Revolving		
	er Street City State Zip Code	As of the date yo	u file, the claim	s: Check all that apply		
	ncurred the debt? Check one.	_				
	btor 1 only	☐ Contingent				
	btor 2 only	☐ Unliquidated				
	btor 1 and Debtor 2 only	☐ Disputed Type of NONPRIC	DITY uncocure	d alaimi		
_ `	least one of the debtors and anoth	По	JATET UNSECUTE	ı vidilli.		
debt	eck if this claim is for a commic claim subject to offset?	inity		ration agreement or divor	ce that you did no	t
■ No	-			g plans, and other similar	debts	
□ Ye		Other Specify				

Schedule E/F: Creditors Who Have Unsecured Claims

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36813

Best Case Bankruptcy

Debto	or 1 Matthew E Grega or 2 Joelyn M Grega		Case number (if known)	
4.2	Avant	Last 4 digits of account number	4022	\$18,363.00
	Nonpriority Creditor's Name 222 N. Lasalle Steet, Suite 1700 Chicago II. 60601	When was the debt incurred?	Revolving	
	Chicago, IL 60601 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Personal Ic	an	
4.3	Capital One	Last 4 digits of account number	5202	\$3,725.00
	Nonpriority Creditor's Name P.O. Box 71083 Charlotte, NC 28272	When was the debt incurred?	Revolving	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.4	Credit One Bank	Last 4 digits of account number	2450	\$708.00
	Nonpriority Creditor's Name P.O. Box 60500 City of Industry, CA 91716	When was the debt incurred?	Revolving	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 14

	or 1 Matthew E Grega or 2 Joelyn M Grega		Case number (if known)	
4.5	Credit Resource Management	Last 4 digits of account number	0860	\$3,208.00
	Nonpriority Creditor's Name 17000 Dallas Pkwy, Suite 204	When was the debt incurred?	Revolving	
	Dallas, TX 75248 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam's	S. Offeck all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
		·		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another	Student loans	a Glaini.	
	☐ Check if this claim is for a community debt	_		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes			
	Li fes	Other. Specify Credit card	pulchases	
4.6	Diversified Consultants	Last 4 digits of account number	2917	\$3,408.00
	Nonpriority Creditor's Name 10550 Deerwood Park Blvd. Jacksonville, FL 32225	When was the debt incurred?	Revolving	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit card	purchases	
4.7	First Fadaral One dit Occident Inc.		0004	\$500.00
4.7	First Federal Credit Control, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	9601	\$530.00
	24700 Chagrin Blvd., Suite 205 Beachwood, OH 44122	When was the debt incurred?	Revolving	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit card	purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

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First Premier Bank	Last 4 digits of account number	7800	\$422.00
Nonpriority Creditor's Name P.O. Box 5529 Sioux Falls, SD 57117	When was the debt incurred?	Revolving	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit card	l purchases	
FST Financial Bank	Last 4 digits of account number	5108	\$7,019.00
Nonpriority Creditor's Name 363 W. Anchor Drive North Sioux City, SD 57049	When was the debt incurred?	Revolving	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Credit card	• • • • • • • • • • • • • • • • • • • •	
LVNV Funding		2450	\$708.00
Nonpriority Creditor's Name	Last 4 digits of account number		\$700.00
625 Pilot Road, Suite 2/3 Las Vegas, NV 89119	When was the debt incurred?	Revolving	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
	■ Other. Specify Credit card	= :	
■ No □ Yes		= :	

Schedule E/F: Creditors Who Have Unsecured Claims

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Joelyn M Grega		Case number (if known)	
LVNV Funding LLC	Last 4 digits of account number	2213	\$18,477.00
Nonpriority Creditor's Name c/o 55 Beattie Place Suite 110 Greenville, SC 29601	When was the debt incurred?	Revolving	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit card	purchases	
Magis Emergency Medicine LLC	Last 4 digits of account number	1977	\$278.00
Nonpriority Creditor's Name P.O. Box 74054 Cleveland, OH 44194-4054	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
□ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Medical set	rvices	
Mariner Finance Nonpriority Creditor's Name	Last 4 digits of account number	5051	\$1,017.00
25 Ghent Road, Suite 121 Akron, OH 44333	When was the debt incurred?	March, 2015	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	a plane, and other similar debts	
■ No	☐ Debts to pension or profit-sharin	•	
Yes	Other. Specify Personal Ic	pan	

Schedule E/F: Creditors Who Have Unsecured Claims

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Joelyn M Grega	Case number (if known)	
Meade & Associates	Last 4 digits of account number 2849	\$1,182.31
Nonpriority Creditor's Name 737 Enterprise Ave.	When was the debt incurred? 2018	
Lewis Center, OH 43035 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that y report as priority claims	rou did not
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Personal Ioan	
Metrohealth	Last 4 digits of account number 1567	\$30.00
Nonpriority Creditor's Name P.O. Box 931703	When was the debt incurred? November, 2018	
Cleveland, OH 44193-1191 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
Debtor 2 only	☐ Contingent	
_	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that y report as priority claims	rou did not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Services	
Midland Credit Management	Last 4 digits of account number 7984	\$790.00
Nonpriority Creditor's Name 8875 Aero Drive San Diego, CA 92123	When was the debt incurred? Revolving	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that y report as priority claims	ou did not
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Credit card purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

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Best Case Bankruptcy

2 Joelyn M Grega		Case number (if known)	
Midland Funding LLC	Last 4 digits of account number	7906	\$414.00
Nonpriority Creditor's Name 2365 Northside Drive, Suite 300 San Diego, CA 92108	When was the debt incurred?	Revolving	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit card	l purchases	
National Credit Adjustors	Last 4 digits of account number	6518	\$1,939.00
Nonpriority Creditor's Name 327 W. 4th Save Hutchinson, KS 67501	When was the debt incurred?	February, 2016	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Personal Id	pan	
National Payment Center Nonpriority Creditor's Name	Last 4 digits of account number	5633	\$8,203.00
PO Box 790336 Saint Louis, MO 63179	When was the debt incurred?	2017	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify Student Lo	oan	

Schedule E/F: Creditors Who Have Unsecured Claims

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Joelyn M Grega			
Pendrick Capital Partners	Last 4 digits of account number	1110	\$269.00
Nonpriority Creditor's Name c/o Phoenix Financial Services PO Box 361450	When was the debt incurred?	Revolving	
Indianapolis, IN 46236			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit card	<u> </u>	
Phoenix Financial Services	Last 4 digits of account number	0043	\$783.00
Nonpriority Creditor's Name P.O. Box 361450	When was the debt incurred?	9/2016	<u> </u>
Indianapolis, IN 46236	=		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	Пол		
Debtor 2 only	☐ Contingent		
Debtor 1 and Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify Medical Se	rvices	
Danifalia Danayany		2407	£2.502.00
Portfolio Recovery Nonpriority Creditor's Name	Last 4 digits of account number	<u>2107</u>	\$3,503.00
120 Corporate Blvd. Norfolk, VA 23502	When was the debt incurred?	Revolving	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one. ☐ Debtor 1 only			
Debtor 2 only	☐ Contingent		
_	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	u	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	■ Other Specify Credit Card		

Schedule E/F: Creditors Who Have Unsecured Claims

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Joelyn M Grega		Case number (if known)	
Revenue Group	Last 4 digits of account number	9656	\$114.0
Nonpriority Creditor's Name 3700 Park East Drive, Suite 240	When was the debt incurred?	December, 2018	
Beachwood, OH 44122 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
_	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	d diam.	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other. Specify Medical Se	• • • • • • • • • • • • • • • • • • • •	
ROI	Last 4 digits of account number	N/A	\$30.
Nonpriority Creditor's Name PO Box 62850 Baltimore, MD 21264	When was the debt incurred?	November, 2018	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical Se	rvices	
		0470	A745
Second Round Sub Nonpriority Creditor's Name	Last 4 digits of account number	8179	\$715.
1701 Directors Blvd, Suite 900 Austin, TX 78744	When was the debt incurred?	Revolving	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify Credit card	I	

Schedule E/F: Creditors Who Have Unsecured Claims

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riority claims	d claim: aration agreement or divorce that you did not ag plans, and other similar debts I purchases 5765 Revolving	\$3,577.00 \$839.00
date you file, the claim lent dated d DNPRIORITY unsecure t loans lons arising out of a separiority claims o pension or profit-sharin Specify Credit carc its of account number the debt incurred? date you file, the claim	is: Check all that apply d claim: eration agreement or divorce that you did not eng plans, and other similar debts I purchases 5765 Revolving	\$839.00
pent dated d DNPRIORITY unsecure t loans ions arising out of a separiority claims o pension or profit-sharin Specify Credit carc its of account number the debt incurred? date you file, the claim	d claim: aration agreement or divorce that you did not ag plans, and other similar debts I purchases 5765 Revolving	\$839.00
dated d DNPRIORITY unsecure t loans ions arising out of a separiority claims o pension or profit-sharin Specify Credit carc its of account number the debt incurred? date you file, the claim	aration agreement or divorce that you did not ng plans, and other similar debts I purchases 5765 Revolving	\$839.00
dated d DNPRIORITY unsecure t loans ions arising out of a separiority claims o pension or profit-sharin Specify Credit carc its of account number the debt incurred? date you file, the claim	aration agreement or divorce that you did not ng plans, and other similar debts I purchases 5765 Revolving	\$839.00
converted to the control of the cont	aration agreement or divorce that you did not ng plans, and other similar debts I purchases 5765 Revolving	\$839.00
t loans tons arising out of a separiority claims to pension or profit-sharing Specify Credit carc the debt incurred? Idate you file, the claim tent	aration agreement or divorce that you did not ng plans, and other similar debts I purchases 5765 Revolving	\$839.00
ions arising out of a separation of a separation of pension or profit-sharing pecify. Credit card its of account number the debt incurred? Idate you file, the claim pent	g plans, and other similar debts I purchases 5765 Revolving	\$839.00
riority claims o pension or profit-sharin Specify Credit carc its of account number the debt incurred? date you file, the claim	g plans, and other similar debts I purchases 5765 Revolving	\$839.00
Credit card its of account number the debt incurred? date you file, the claim	5765 Revolving	\$839.00
the debt incurred? date you file, the claim	5765 Revolving	\$839.00
the debt incurred? date you file, the claim	Revolving	\$839.00
the debt incurred? date you file, the claim	Revolving	\$839.00
date you file, the claim		
gent	is: Check all that apply	
gent	is: Check all that apply	
dated		
d ONPRIORITY unsecure	d claim:	
loans	a dam.	
	aration agreement or divorce that you did not	
•	ng plans, and other similar debts	
Specify Credit Card		
its of account number	8564	\$1,008.00
the debt incurred?	Revolving	
date you file, the claim	is: Check all that apply	
jent		
dated		
	d claim:	
ons arising out of a sepa	aration agreement or divorce that you did not	
nonly cialms		
a pansion or profit about		
gi c	date you file, the claim gent dated ed ONPRIORITY unsecure it loans tions arising out of a separationity claims	its of account number 8564 s the debt incurred? Revolving date you file, the claim is: Check all that apply gent dated ed ONPRIORITY unsecured claim: It loans tions arising out of a separation agreement or divorce that you did not

Schedule E/F: Creditors Who Have Unsecured Claims

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2 Joelyn M Grega		Case number (if known)	
U.S. Dept MOHELA	Last 4 digits of account number	7362	\$20,000.00
Nonpriority Creditor's Name 633 Spirit Drive Chesterfield, MO 63005	When was the debt incurred?	2016-2018	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	,	энг эрр у	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	☐ Other. Specify		
	Student Lo	ans	
U.S. Dept of Education	Last 4 digits of account number	0392	\$8,070.00
Nonpriority Creditor's Name PO Box 790336 Saint Louis, MO 63179	When was the debt incurred?	2017	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
_	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other. Specify	g plane, and other enimal desir	
— 165	Student loa	an	
University Hospital Nonpriority Creditor's Name	Last 4 digits of account number	8910	\$300.00
PO Box 781988 Detroit, MI 48278	When was the debt incurred?	January, 2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	■ Other. Specify Medical Se	rvices	

Schedule E/F: Creditors Who Have Unsecured Claims

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Best Case Bankruptcy

	Debtor 1 Matthew E Grega Debtor 2 Joelyn M Grega Case number (if known)					
4.3 2	Verizon	Last 4 digits of account number	8450	\$299.00		
	Nonpriority Creditor's Name P.O. Box 25505 Lehigh Valley, PA 18002-5505	When was the debt incurred?	Revolving			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Wireless service				
4.3	WebBank	Last 4 digits of account number	2213	\$18,477.00		
	Nonpriority Creditor's Name c/o Advant 640 N. LaSalle St., Ste 535	When was the debt incurred?	December, 2015	\$18,477.00		
	Chicago, IL 60654 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims				
	■ No	Debts to pension or profit-sharing				
	Yes	Other. Specify Personal L				
4.3 4	Wells Fargo Dealer Services Nonpriority Creditor's Name	Last 4 digits of account number	7850	\$10,927.00		
	P.O. Box 25341	When was the debt incurred?	March, 2015			
	Santa Ana, CA 92799-5341 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	, o auto , . , o	or official and apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharin				
	Yes	Other. Specify Car that was repossessed				

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

type of unsecured claim. Total Claim 6a. Domestic support obligations 6a. \$ 0.00 Total claims from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$	Debtor 1 No Debtor 2				Case number (if known)	
Name and Address Javich Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114 Name and Address Javich Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114 Name and Address Javich Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114 Name and Address Javich Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114 Name and Address Javich Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114 Name and Address Javich Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114 Name and Address Jefferson Capital 10 McLelante Road Saint Cloud, MN 56303-2198 Last 4 digits of account number Name and Address LVN Funding 4.22 of (Check one): Last 4 digits of account number Name and Address LVN Funding 4.25 of Check one): Last 4 digits of account number Name and Address LVN Funding 4.26 of Check one): Last 4 digits of account number Name and Address LVN Funding 4.26 of Check one): Last 4 digits of account number Name and Address LVN Funding P.O. Box 740281 Name and Address Last 4 digits of account number Name and Address	Client Services 3451 Harry S. Truman Blvd.			Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Javitch Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114 Name and Address Javitch Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114 Name and Address Javitch Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114 Name and Address Javitch Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114 Name and Address Javitch Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114 Name and Address Javitch Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114 Name and Address Javitch Block 110 Superior Ave, 19th Floor Cleveland, OH 44114 Name and Address Last 4 digits of account number Name and Address Last 4 digits of account number Name and Address LNN Funding Cres Part 2 did you list the original creditor? Last 4 digits of account number Name and Address LNN Funding Co				Last 4 digits of account number		
Name and Address Javich Block 1100 Superior Ave, 19th Floor Cleveland, OH 4114 Name and Address Javich Block 1100 Superior Ave, 19th Floor Cleveland, OH 4114 Name and Address Jefferson Capital 18 McLeland Road Saint Cloud, MN 56303-2198 Last 4 digits of account number Name and Address LuN Funding Co 55 Beattie Place Suite 110 Greenville, SC 29601 Name and Address LuN Funding Co 55 Beattie Place Suite 110 Greenville, SC 29601 Name and Address LuN Funding Co 55 Beattie Place Suite 110 Greenville, SC 29601 Name and Address LuN Funding Co 55 Beattie Place Suite 110 Greenville, SC 29601 Name and Address LuN Funding Co 55 Beattie Place Suite 110 Greenville, SC 29601 Name and Address LuN Funding Last 4 digits of account number Name and Address LuN Funding Last 4 digits of account number Name Address Lun Funding Last 4 digits of account number Name Address Lun Funding Last 4 digits of account number Name Address Lun Funding Last 4 digits of account number Name Address Last 4 digits of account number Name and Address Last 4 digits of account number Name and Address Last 4 digits of account number Last 4 digits of account number Last 4 digits of account number Name and Address Last 4 digits of account number Last 4 digits of account number Last 4 digits of account number Name and Address Last 4 digits of account number Last 4 digits of account number Name and Address Last 4 digits of account number Name and Address Stenger & Stenge	Javitch Block 1100 Superior Ave, 19th Floor		, 19th Floor 14		☐ Part 1: Creditors with Priority Unsecured Claims	
Javitch Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114 Last 4 digits of account number Name and Address Jefferson Capital 15 McLealand Road Saint Cloud, MN 56303-2198 On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Name and Address Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.32 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Name and Address Last 4 digits of account number Name and Address Last 4 digits of account number Name and Address Name and Address Name and Address Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 3: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 3: Creditors with Priority Unsecured Claims Part 4: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 3: Creditors with Priority Unsecured Claims Part 4: digits of account number Name and		, -		Last 4 digits of account number		
Name and Address JefferSon Capital 16 McLetand Road Saint Cloud, MN 56303-2198 In display of account number Display of Check one):	Javitch Block 1100 Superior Ave, 19th Floor				☐ Part 1: Creditors with Priority Unsecured Claims	
Jefferson Capital 1				Last 4 digits of account number		
Name and Address Last 4 digits of account number Name and Address LVN Funding Co 55 Beattle Place Suite 110 Greenville, SC 29601 Name and Address LVN Funding P.O. Box 740281 Houston, TX 77274 Name and Address Last 4 digits of account number Name and Address LVN Funding P.O. Box 740281 Houston, TX 77274 Name and Address National Enterpriss Systems 2479 Edison Blvd, Unit A Twinsburg, OH 44087 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Name and Address National Enterpriss Systems 2479 Edison Blvd, Unit A Twinsburg, OH 44087 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Name and Address On which entry	Jefferson	Capital		•	☐ Part 1: Creditors with Priority Unsecured Claims	
Name and Address LVN Funding Creenville, SC 29601 Name and Address LVN Funding P.O. Box 740281 Houston, TX 77274 Name and Address Norfolk, VA 23502 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.25 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Norfolk, VA 23502 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.27 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Name and Address Stenger & Stenger Stenger & Stenger Stenger & Stenger Stenger & Stenger Address Stenger & Stenger Stenger & Stenger Stenger & Stenger Name and Address Stenger & Stenger Stenger & Stenger Stenger & Stenger Last 4 digits of account number Name and Address Stenger & Stenger Stenger & Stenger Last 4 digits of account number Name and Address Stenger & Stenger Last 4 digits of account number Name and Address Stenger & Stenger Last 4 digits of account number Name and Address Stenger & Stenger Last 4 digits of account number Name and Address Stenger & Stenger Last 4 digits of account number Name and Address Stenger & Stenger Last 4 digits of account number Name and Address Stenger & Stenger Last 4 digits of account number Name and Address Stenger & Stenger Last 4 digits of account number Name and Address Stenger & Stenger Last 4 digits of account number Name and Address Stenger & Stenger Last 4 digits of account number Name and Address Stenger					■ Part 2: Creditors with Nonpriority Unsecured Claims	
Line 4.33 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 3: Creditors with Nonpriority Unsecured Claims Part 3: Creditors with Nonpriority Unsecured Claims Part 4: Creditors with Nonpriority Unsecured Claims Part 3: Creditors with Nonpriority Unsecured Claims Part 4: Creditors with Nonpriority Unsecured Claims Part 3: Creditors with Nonpriority Unsecured Claims Part 4: Creditors with Nonpriority Unsecured Claims Part 4: Creditors with Nonpriority Unsecured Claims Part 3: Creditors with Nonpriority Unsecured Claims Part 4: Creditors with Nonpriority Unsecured Claims Part 5: Creditors with Nonpriority Unsecured Claims Part 6: Creditors with Nonpriority Unsecured Claims Part 6: Creditors with				Last 4 digits of account number		
Last 4 digits of account number	LVN Fund c/o 55 Bea	ling attie Plac			☐ Part 1: Creditors with Priority Unsecured Claims	
Name and Address LVNV Funding P.O. Box 740281 Houston, TX 77274 Houston, TX 77274 Name and Address Norfolk, VA 23502 Name and Address Stenger & Stenger 2618 East Paris Ave, SE Grand Rapids, MI 49546 Con which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? In e 4.25 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.27 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Name and Address Stenger & Stenger 2618 East Paris Ave, SE Grand Rapids, MI 49546 Can which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 or (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Do which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 or (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Add the Amounts for Each Type of Unsecured Claims Last 4 digits of account number Fart 4: Add the Amounts for Each Type of Unsecured Claims 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for extrain type of unsecured claims For total Claims For total Claims For total Claims For total Claims For t	Greenville	e, SC 296	01	Last 4 digits of account number		
P.O. Box 740281 Houston, TX 77274 Last 4 digits of account number Part 2: Creditors with Nonpriority Unsecured Claims				On which entry in Part 1 or Part 2 di		
Name and Address National Enterprise Systems 2479 Edison Blvd, Unit A Twinsburg, OH 44087 Name and Address Portfolio Recovery 140 Corporate Blvd. Norfolk, VA 23502 Name and Address Stenger & Stenger 2618 East Paris Ave, SE Grand Rapids, MI 49546 Name and Address Stenger & Stenger Stenger & Stenger Cafa Bast Paris Ave, SE Grand Rapids, MI 49546 Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Name and Address Stenger & Stenger 2618 East Paris Ave, SE Grand Rapids, MI 49546 North Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Name and Address Stenger & Stenger Stenger & Stenger Cafa East Paris Ave, SE Grand Rapids, MI 49546 Do which entry in Part 1 or Part 2 did you list the original creditor? Line 4.11 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claims Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for entry type of unsecured claims. Total Claim 6b. Taxes and certain other debts you owe the government 6b. \$	P.O. Box 740281		l .			
Name and Address Stenger 2618 East Paris Ave, SE Grand Rapids, MI 49546 Name and Address Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.27 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 3: Creditors with Nonpriority Unsecured Claims Part 4: Creditors with Nonpriority Unsecured Claims Part 3: Creditors with Nonpriority Unsecured Claims Part 4: Creditors with Nonpriority Unsecured Claims Part 3: Creditors with Nonpriority Unsecured Claims Part 4: Creditors with Nonpriority				Last 4 digits of account number		
Name and Address Portfolio Recovery 140 Corporate Blvd. Norfolk, VA 23502 Name and Address Stenger 2618 East Paris Ave, SE Grand Rapids, MI 49546 Name and Address Stenger S	National E 2479 Edis	Enterprison Blvd,	Unit A		☐ Part 1: Creditors with Priority Unsecured Claims	
Portfolio Recovery 140 Corporate Blvd. Norfolk, VA 23502 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Name and Address Stenger & Stenger 2618 East Paris Ave, SE Grand Rapids, MI 49546 On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Stenger & Stenger 2618 East Paris Ave., SE Grand Rapids, MI 49546 On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claims. Last 4 digits of account number Fart 4: Add the Amounts for Each Type of Unsecured Claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for extrype of unsecured claims. Total Claim 6a. Domestic support obligations 6a. Domestic support obligations 6b. Taxes and certain other debts you owe the government 6b. Taxes and certain other debts you owe the government Conditions Total Claims	i wilisbui	g, O11 ++	507	Last 4 digits of account number		
Name and Address Stenger & Stenger 2618 East Paris Ave, SE Grand Rapids, MI 49546 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one):	Portfolio I 140 Corpo	Recovery orate Blv			Part 1: Creditors with Priority Unsecured Claims	
Stenger & Stenger 2618 East Paris Ave, SE Grand Rapids, MI 49546 Name and Address Stenger & Stenger 2618 East Paris Ave., SE Grand Rapids, MI 49546 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.11 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Stenger & Stenger 2618 East Paris Ave., SE Grand Rapids, MI 49546 Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Fart 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for extype of unsecured claims. Total Claim 6a. Domestic support obligations 6a. Domestic support obligations 6a. Taxes and certain other debts you owe the government 6b. Taxes and certain other debts you owe the government 6b. \$		71 20002		Last 4 digits of account number		
Name and Address Stenger & Stenger 2618 East Paris Ave., SE Grand Rapids, MI 49546 Part 4: Add the Amounts for Each Type of Unsecured Claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for extype of unsecured claims. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for extype of unsecured claims. Total claims from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$	Stenger & 2618 East	Stenger Paris Av	re, SE	•	☐ Part 1: Creditors with Priority Unsecured Claims	
Stenger & Stenger 2618 East Paris Ave., SE Grand Rapids, MI 49546 Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. Total Claim Foa. Domestic support obligations 6a. \$ 0.00 Total Claims From Part 1 6b. Taxes and certain other debts you owe the government 6b. \$	Orana ra	pido, im	100-10	Last 4 digits of account number		
Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. Total Claim 6a. Domestic support obligations 6a. \$ 0.00 Total claims from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$	Stenger & 2618 East	Stenger Paris Av	re., SE	•	☐ Part 1: Creditors with Priority Unsecured Claims	
6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. Total Claim 6a. Domestic support obligations 6a. \$ 0.00 Total claims from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$		- •		Last 4 digits of account number		
6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for extype of unsecured claim. Total Claim 6a. Domestic support obligations 6a. \$ 0.00 Total claims from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$	Part 4:	Add the Ar	nounts for Each Type o	f Unsecured Claim		
6a. Domestic support obligations 6a. \$ 0.00 Total claims from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$	6. Total the a	mounts of	certain types of unsecured		ical reporting purposes only. 28 U.S.C. §159. Add the amounts for ea	ach
Total claims from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$		60	Domestic support obligat	ions		
	claims				·	
Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims Page 1				-	·	3 of 14

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Best Case Bankruptcy

Debtor 1 Matthew E Grega Debtor 2 Joelyn M Grega Case number (if known) 0.00 Claims for death or personal injury while you were intoxicated 6c. 0.00 Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** 6f Student loans 6f. 28,070.00 Total claims from Part 2 Obligations arising out of a separation agreement or divorce that 0.00 6g. you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 111,675.31

6j.

139,745.31

Total Nonpriority. Add lines 6f through 6i.

Fill in this information to identify your case:					
Debtor 1	Matthew E Grega				
	First Name	Middle Name	Last Name		
Debtor 2	Joelyn M Grega				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number _				☐ Check if this is an amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	City		State	ZIF Code	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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Fill in this infor	mation to identify your	case:			
Debtor 1	Matthew E Grega				
Debtor 2	First Name Joelyn M Grega	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number (if known)					☐ Check if this is an amended filing
	orm 106H • H: Your Code	ebtors			12/15
people are filing fill it out, and no your name and	g together, both are equa umber the entries in the case number (if known).	ally responsible for supp boxes on the left. Attach . Answer every question	olying correct information the Additional Page to	n. If more space is r this page. On the to	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
□ No ■ Yes					
			roperty state or territory? erto Rico, Texas, Washin		y states and territories include
■ No. Go to		ise, or legal equivalent live	e with you at the time?		
in line 2 ag	ain as a codebtor only it), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make su	ire you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	nn 1: Your codebtor Number, Street, City, State and Zll	P Code		Column 2: The cro	editor to whom you owe the debt es that apply:
4232 Brun	ael Grega Arlington Drive Iswick, OH 44212 her of debtor			■ Schedule D, I □ Schedule E/F □ Schedule G _ Fifth Third Ban	, line

Fill in this informati	on to identify your case:	
Debtor 1	Matthew E Grega	
Debtor 2 (Spouse, if filing)	Joelyn M Grega	
United States Bank	cruptcy Court for the: NORTHERN DISTRICT OF OHIO	
Case number (If known)		Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official For	<u>m 106l</u> I: Your Income	13 income as of the following date: MM / DD/ YYYY 12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation LPN **Phlebotomist** Include part-time, seasonal, or **Employer's name** Amerathon LLC **Progressive Parma Care Center** self-employed work. **Employer's address** Occupation may include student 671 Ohio Pike Suite K 5553 Broadview Road or homemaker, if it applies. Cincinnati, OH 45245 Cleveland, OH 44134 How long employed there? 6 years Since June 13, 2019

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 455.00 4.292.65 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 3. Calculate gross Income. Add line 2 + line 3. 4,292.65 455.00

Official Form 106I Schedule I: Your Income page 1

Case number (if known)

					Fo	r Debtor 1			For Debtor 2 or non-filing spouse		
	Сору	y line 4 here	4.		\$_	4,292	2.65	\$_		455.00	<u></u>
5.	List a	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$	1,073	3.16	\$		113.75	;
	5b.	Mandatory contributions for retirement plans	5b).	\$		0.00	\$		0.00)
	5c.	Voluntary contributions for retirement plans	5c	: .	\$	(0.00	\$		0.00)
	5d.	Required repayments of retirement fund loans	5d	i.	\$		0.00	\$		0.00	_
	5e.	Insurance	5e) .	\$		6.92	\$		0.00	_
	5f.	Domestic support obligations	5f.		\$		0.00	\$		0.00	
	5g.	Union dues	5 g	1.	\$		0.00	\$		0.00	_
	5h.	Other deductions. Specify:	_	, 1.+	\$			+ \$		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,800	0.08	\$		113.75	_ <u>}</u>
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,492	2.57	\$;	341.25	5
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	۱.	\$	(0.00	\$		0.00	ı
	8b.	Interest and dividends	8b).	\$	(0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$		0.00	\$	1	100.00	_
	8d.	Unemployment compensation	8d		\$		0.00	\$	٠,	0.00	_
	8e.	Social Security	8e		\$-		0.00	\$-		0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$_	(0.00	\$_		0.00	_ <u></u>
	8g.	Pension or retirement income	8g	J.	\$		0.00	\$		0.00	
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$_	(0.00	+ \$_		0.00	<u> </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$_	(0.00	\$_	1	,100.0	0
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,492.57	+ \$	1	,441.25	= \$ _	3,933.82
11.	Includ other	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not sify:	depe			•				4	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines							e. 12.	\$	3,933.82
46			•						L	Combi month	ned ly income
13.	Do y	ou expect an increase or decrease within the year after you file this form No.									
	П	Yes. Explain: Co-debtor worked at The Woods in French Creek	du	rin	a th	ne last six	mon	ths	but no le	onger	works

Official Form 106l Schedule I: Your Income page 2

there.

						•				
Fill	in this informa	tion to identify yo	our case:							
Deb	otor 1	Matthew E G	rega			_		this is:		
Det	otor 2	Joelyn M Gre	202					amended filing	ing postpetition chapte	r
	ouse, if filing)	Joeryn W Gre	-ya			"			the following date:	
Uni	ted States Bankr	uptcy Court for the:	: NORTH	IERN DISTRICT OF OHIC)		MM	/ DD / YYYY		
		., .,								
1	se numbe r known)									
0	fficial Fo	rm 106J								
S	chedule	J: Your I	Exper	ises					13	2/1
Be	as complete a	and accurate as	possible eded, atta	If two married people and the community of the community					r supplying correct	
		ibe Your House	hold							
1.	Is this a joir									
	□ No. Go to			ata hayaahald?						
		s Debtor 2 live i	n a separ	ate nousenoid?						
	■ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of De	ebtor 2	<u>.</u>		
2.	Do you have	e dependents?	□ No							
	Do not list Do Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto			Dependent's age	Does dependent live with you?	
	Do not state	tho							□ No	
	dependents				Daughter			14	Yes	
					Daughter			16	□ No ■ Yes	
					Son			17	□ No	
					3011				■ Yes □ No	
									☐ Yes	
3.	expenses o	penses include f people other the d your depende	^{han} ⊓	No Yes					00	
Est	timate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the		h assistance and		government assistance i luded it on <i>Schedule I:</i> \				Your expe	enses	
-		-								
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgag	e 4.	\$		700.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		rty, homeowner's				4b.			0.00	
		·	•	ipkeep expenses		4c.			300.00	
5.		owner's associat		dominium dues our residence, such as ho	me equity loans	4d. 5.			0.00	
						J.	T		0.00	

	tor 1 tor 2		/ E Grega	Casa num	ber (if known)	
Den	101 2	Joelyn N	vi Grega	Case nun	ibei (ii kilowii)	
6.	Utilit	ies:				
	6a.	Electricity,	, heat, natural gas	6a.	\$	240.00
	6b.	Water, sev	wer, garbage collection	6b.	\$	150.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	400.00
	6d.	Other. Spe	ecify:	6d.	\$	0.00
7.	Food	d and hous	ekeeping supplies	7.	\$	1,100.00
8.	Child	dcare and o	children's education costs	8.	\$	0.00
9.	Cloth	hing, laund	lry, and dry cleaning	9.	\$	200.00
10.	Pers	onal care p	products and services	10.	\$	100.00
11.	Medi	ical and de	ental expenses	11.	\$	30.00
12.			. Include gas, maintenance, bus or train fare. ear payments.	12.	\$	500.00
13.			clubs, recreation, newspapers, magazines, and boo	ks 13.	\$	100.00
			tributions and religious donations	14.		0.00
		rance.			·	0.00
			nsurance deducted from your pay or included in lines 4 c	or 20.		
	15a.	Life insura	ance	15a.	\$	0.00
	15b.	Health ins	surance	15b.	\$	0.00
	15c.	Vehicle in:	surance	15c.	\$	150.00
	15d.	Other insu	urance. Specify: Pet Insurance	15d.	\$	100.00
16.	Taxe	s. Do not in	nclude taxes deducted from your pay or included in lines	4 or 20.		
	Spec	ify:		16.	\$	0.00
17.			ease payments: ents for Vehicle 1	17a.	\$	402.00
			ents for Vehicle 2	17b.	*	418.00
		Other. Spe		17c.	·	0.00
		Other. Spe	· · · · · · · · · · · · · · · · · · ·	176. 17d.	· -	0.00
18		•	s of alimony, maintenance, and support that you did		Ψ	0.00
10.			your pay on line 5, Schedule I, Your Income (Official		\$	0.00
19.			s you make to support others who do not live with yo		\$	0.00
	Spec	cify:		19.		
20.	Othe	r real prop	erty expenses not included in lines 4 or 5 of this for	n or on Schedule I: Yo	our Income.	
	20a.	Mortgages	s on other property	20a.	\$	0.00
	20b.	Real estat	te taxes	20b.	\$	0.00
	20c.	Property, I	homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	ner's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:	Sports for children	21.	+\$	200.00
22	Calc	ulato vour	monthly expenses			
22.			through 21.		\$	5,090.00
			through 21. 22 (monthly expenses for Debtor 2), if any, from Official F	form 106 L 2	\$	5,090.00
				01111 1003-2		
	22c.	Add line 22	a and 22b. The result is your monthly expenses.		\$	5,090.00
23.	Calc	ulate your	monthly net income.			
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	3,933.82
	23b.	Copy your	r monthly expenses from line 22c above.	23b.	-\$	5,090.00
	23c.		our monthly expenses from your monthly income.	22-	•	-1,156.18
		The result	t is your <i>monthly net income</i> .	23c.	\$	-1,130.10
24.	For ex	xample, do yo ication to the	an increase or decrease in your expenses within the ou expect to finish paying for your car loan within the year or do terms of your mortgage?			se or decrease because of a
			Explain here:			
	⊔ Y6	es.	Explain liele.			

Elli in distriction							
FIII IN this infor	mation to identify your	case:					
Debtor 1	Matthew E Grega						
	First Name	Middle Name	Las	t Name			
Debtor 2	Joelyn M Grega First Name	Middle Norse		4 NI			
(Spouse if, filing)	First Name	Middle Name	Las	t Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF	OHIO				
Case number							
(if known)							Check if this is an amended filing
f two married p ou must file thibbtaining mone	eople are filing togethe	r, both are equally responsible bankruptcy schedules or a connection with a bankrupty and 3571.	ble for s	upplyir	ng correct information. edules. Making a false sta		
Sig	n Below						
Did you pa	ay or agree to pay some	one who is NOT an attorney	to help	you fil	Il out bankruptcy forms?		
■ No							
☐ Yes.	Name of person						tition Preparer's Notice, ature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the summa	ry and s	chedul	es filed with this declarat	ion and	
X /s/ Mat	tthew E Grega		_ x	/s/ Jo	oelyn M Grega		
	ew E Grega			,	n M Grega		
Signatu	ire of Debtor 1			Signat	ture of Debtor 2		
Date	July 25, 2019			Date	July 25, 2019		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in this info	rmation to identify you	r case:			
Debtor 1	Matthew E Greg				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Joelyn M Grega First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number					
(if known)					Check if this is an mended filing
					menaea ming
Official Fo	orm 107				
		Affaira far Indivi	duala Eilina far B	ankruntav	4/40
			duals Filing for B		4/19
				equally responsible for sup y additional pages, write you	
	wn). Answer every que		and form. On the top of an	y additional pages, write you	ii name ana case
Part 1: Give	Details About Your Ma	arital Status and Where You	ı Lived Before		
-					
i. What is yo	ur current marital statu	IS?			
■ Marrie	ed				
☐ Not m	arried				
2. During the	last 3 years, have you	lived anywhere other than	where you live now?		
_		•	•		
■ No					
☐ Yes. L	list all of the places you l	ived in the last 3 years. Do n	ot include where you live nov	I.	
Debtor 1 I	Prior Address:	Dates Debtor 1	Debtor 2 Prior Ac	ldress:	Dates Debtor 2
		lived there			lived there
				ity property state or territory	
states and territo	ories include Arizona, Ca	iliornia, idano, Louisiana, ive	evada, New Mexico, Puerto R	ico, Texas, Washington and W	/isconsin.)
No					
☐ Yes. N	Make sure you fill out Sch	hedule H: Your Codebtors (O	fficial Form 106H).		
Part 2 Expl	ain the Sources of You	r Income			
LAPI	ani the Sources of Tou	- Income			
				ear or the two previous cale	ndar years?
			all businesses, including part re together, list it only once ur		
_	3,.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , ,		
□ No					
■ Yes. F	fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross income	Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
Fac. 1	4 of assument	_	,	_	,
	1 of current year until led for bankruptcy:	■ Wages, commissions, bonuses, tips	\$27,930.30	Wages, commissions, bonuses, tips	\$14,997.97
		☐ Operating a business		Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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Best Case Bankruptcy

		•							
				Debtor 1		Debtor 2			
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
	r last calei inuary 1 to	ndar year: December	31, 2018)	■ Wages, commissions, bonuses, tips	\$39,166.45	■ Wages, combonuses, tips	missions,	\$10,835.25	
				☐ Operating a business		☐ Operating a	business		
		dar year be December		■ Wages, commissions, bonuses, tips	\$40,000.00	■ Wages, combonuses, tips	missions,	\$10,002.00	
				☐ Operating a business		☐ Operating a	business		
	winnings. List each No	If you are fil	ling a joint ca	; pensions; rental income; inter ise and you have income that you come from each source separa Debtor 1	ou received together, list it	only once under De	ebtor 1.	io gambling and lottery	
Pa	rt 3: Lis	t Certain Pa	avments Yo	Sources of income Describe below. u Made Before You Filed for	Gross income from each source (before deductions and exclusions) Bankruptcy	Sources of inc Describe below		Gross income (before deductions and exclusions)	
6.	Are eithe ☐ No.	Neither D individual	ebtor 1 nor primarily for	2's debts primarily consumer Debtor 2 has primarily consumer a personal, family, or househor	imer debts. Consumer deb ld purpose."		·	01(8) as "incurred by an	
		□ No.	e 90 days bef Go to line	ore you filed for bankruptcy, di 7.	d you pay any creditor a tota	al of \$6,825* or mo	e?		
		☐ Yes	paid that c	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the on 4/01/22 and every 3 year	nts for domestic support obli nis bankruptcy case.	gations, such as ch	ild support a	and alimony. Also, do	
	■ Yes.			or both have primarily consurer you filed for bankruptcy, di		al of \$600 or more?			
		□ No.	Go to line	7.					
		■ Yes	include pa	each creditor to whom you pai yments for domestic support o or this bankruptcy case.					
	Creditor	's Name an	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this	payment for	
	P.O. Bo	nird Bank ox 630412 nati, OH 45	5263	Regular Mont payments for mortgage only	hly \$2,099.37	\$79,921.56		Card Repayment ers or vendors	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

? partner; corporations ent, including one for support and	
nis payment	
ot that benefited an	
nis payment or's name	
ng? or custody	
Status of the case	
□ Pending□ On appeal■ Concluded	
1	
seized, or levied?	
Value of the	
property	
Unknown	
Olikilowii	
t L	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debto Debto	•		Case number (if known)					
	0 II. N							
(Creditor Name and Address	'	Describe the Property	Date	Value of the property			
		i	Explain what happened					
1	Portfolio Recovery 120 Corporate Blvd. Norfolk, VA 23502		Garnishments from paycheck of debtor, Matthew Grega	Through present	\$3,379.31			
•	,		☐ Property was repossessed. ☐ Property was foreclosed.					
		ı	Property was garnished.					
_		[☐ Property was attached, seized or levied.					
	ccounts or refuse to make a payme No		y, did any creditor, including a bank or financial in se you owed a debt?	stitution, set off any	amounts from your			
C	Creditor Name and Address	I	Describe the action the creditor took	Date action was taken	Amount			
Part 5	List Certain Gifts and Contribution 2 years before you filed for banks.	ankruptcy	, did you give any gifts with a total value of more t	han \$600 per person	?			
	Gifts with a total value of more than per person	\$600	Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift Address:	and						
14. W ■	No		y, did you give any gifts or contributions with a tota oution.	al value of more than	\$600 to any charity?			
n	Gifts or contributions to charities th more than \$600 Charity's Name Address (Number, Street, City, State and ZIF		Describe what you contributed	Dates you contributed	Value			
Part 6	List Certain Losses							
15. W		nkruptcy	or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,			
	No Yes. Fill in the details.							
	Describe the property you lost and	Des	cribe any insurance coverage for the loss	Date of your	Value of property			
r	how the loss occurred	Inclu	ide the amount that insurance has paid. List pending	loss	lost			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

insurance claims on line 33 of Schedule A/B: Property.

	,								
Pa	rt 7: List Certain Payments or Transfers								
16.	Within 1 year before you filed for bankruptcy, d consulted about seeking bankruptcy or prepari Include any attorneys, bankruptcy petition prepare	ng a bankruptcy petition?			rty to anyone you				
	□ No								
	Yes. Fill in the details.			_					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount o paymer				
	Law Office of Peter A. Russell 10950 Pearl Road, Suite A-2 Strongsville, OH 44136 p.russell@sbcglobal.net	Attorney Fees		March 5, 2019	\$1,000.0				
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.								
	No No								
	☐ Yes. Fill in the details.								
	Person Who Was Paid Address	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount o				
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already list No Yes. Fill in the details.	ness or financial affairs? as security (such as the granting of a sec							
	Person Who Received Transfer Address	Description and value of property transferred		ny property or received or debts	Date transfer was made				
	Person's relationship to you		paid iii exc	inange					
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No		lf-settled tru	st or similar device o	of which you are a				
	Yes. Fill in the details.	Baradadan and I (d)	44		Data Tax				
	Name of trust	Description and value of the proper	ty transferre	ed	Date Transfer was made				
Pa	rt 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit Boxes, and Stora	ge Units						
20.	Within 1 year before you filed for bankruptcy, w	ere any financial accounts or instrum	ents held in	your name, or for yo	our benefit, closed,				
	sold moved or transformed?								

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

☐ Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Matthew E Grega
Debtor 2 Joelyn M Grega

Case number (if known)

21.	. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or p	lace other than your home within 1	year before you filed for bankruptcy	?			
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control for	Someone Else					
23.	Do you hold or control any property that some for someone.	one else owns? Include any proper	y you borrowed from, are storing fo	r, or hold in trust			
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	t 10: Give Details About Environmental Inform	ation					
For	the purpose of Part 10, the following definitions	apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	nir, land, soil, surface water, ground	• • • • • • • • • • • • • • • • • • • •				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		aw, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of when	they occurred.				
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	under or in violation of an environm	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debto Debto		thew E Grega lyn M Grega		Ca	se number (if known)	
26. ⊦	lave you b	een a party in any judicial or a	dministrative proceeding under any	environi	mental law? Include settle	ements and orders.
	■ No □ Yes. F	ill in the details.				
	Case Title Case Num	ber	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Part '	11: Give	Details About Your Business o	or Connections to Any Business			
7. V	Vithin 4 ye	ars before you filed for bankru	ptcy, did you own a business or ha	ve any of	the following connection	ns to any business?
	☐ A s	ole proprietor or self-employed	d in a trade, profession, or other act	ivity, eith	ner full-time or part-time	
	☐ A m	nember of a limited liability con	npany (LLC) or limited liability partn	ership (L	_LP)	
	□ар	artner in a partnership				
	☐ An	officer, director, or managing e	executive of a corporation			
	☐ An	owner of at least 5% of the vot	ing or equity securities of a corpora	ation		
	■ No. No	one of the above applies. Go to) Part 12.			
	_		fill in the details below for each bus	iness.		
	Business Name Address (Number, Street, City, State and ZIP Code)		Describe the nature of the business Name of accountant or bookkeeper		Employer Identification number	
					Do not include Social Security number or ITIN.	
				Dates busine		
		ars before you filed for bankru , creditors, or other parties.	ptcy, did you give a financial staten	nent to ar	nyone about your busines	ss? Include all financial
	No					
		ill in the details below.				
	Name Address (Number, Stre	et, City, State and ZIP Code)	Date Issued			
Part '	12: Sign	Below				
re tru vith a	ue and cor a bankrupte	rect. I understand that making	Financial Affairs and any attachment a false statement, concealing prope o \$250,000, or imprisonment for up	erty, or o	btaining money or prope	
	latthew E		/s/ Joelyn M Grega			
Matthew E Grega Signature of Debtor 1			Joelyn M Grega Signature of Debtor 2			
Date	July 25	, 2019	Date July 25, 2019			
			ment of Financial Affairs for Individu	ıals Filin	a for Bankruntey (Official	Form 107\?
■ No		dulional pages to rour states	ment of I manetal Analis for marviat	iais i iiii	g for Bankruptcy (Official	10111110771
∃Ye	s					
Did yo	ou pay or a	igree to pay someone who is n	ot an attorney to help you fill out ba	ankruptcy	y forms?	
■ No						
∟ Ye:	s. Name of	Person Attach the Bank	ruptcy Petition Preparer's Notice, Dec	laration, a	and Signature (Official Form	n 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this inforr	nation to identify your	case:		
Debtor 1	Matthew E Grega			_
Debtor 2	First Name Joelyn M Grega	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	-
United States Ba	inkruptcy Court for the:	NORTHERN DIS	TRICT OF OHIO	_
Case number _ (if known)				☐ Check if this is an amended filing
Official Fo Stateme r		n for Indiv	riduals Filing Under Cha	pter 7 12/15
sign an Be as complete a	nd date the form.	le. If more space is	oth are equally responsible for supplying corresponding some states a separate sheet to this form	
-			c: Creditors Who Have Claims Secured by Pro	perty (Official Form 106D), fill in the
	editor and the property t	nat is collateral	What do you intend to do with the property secures a debt?	that Did you claim the property as exempt on Schedule C
Creditor's B name:	syrider Finance, LLC		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt:	107,000 miles	utlander	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
Creditor's C	redit Acceptance Co	rporation	Surrender the property.	■ No

Creditor's **Credit Acceptance Corporation** name:

property securing debt:

name:

Official Form 108

Description of 2010 Hyundai Sonata

Creditor's Fifth Third Bank

Description of 4903 Maplecrest Ave. Cleveland, OH 44134 Cuyahoga

County

■ Surrender the property.

☐ Retain the property and redeem it. \square Retain the property and enter into a

Reaffirmation Agreement. ☐ Retain the property and [explain]:

☐ Surrender the property. ☐ Retain the property and redeem it.

Retain the property and enter into a Reaffirmation Agreement.

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Best Case Bankruptcy

☐ Yes

□ No

Yes

Debtor 1 Matthew E Grega Joelyn M Grega	Case number (if known)	
property PPN: 447-07-085 securing debt:	☐ Retain the property and [explain]:	_
Creditor's PNC Bank name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property 2014 Hyundai Veloster 130,000 miles	Retain the property and enter into a Reaffirmation Agreement.Retain the property and [explain]:	■ Yes
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you lister on the information below. Do not list real estate leases. U You may assume an unexpired personal property lease in	d in Schedule G: Executory Contracts and Unexpire Inexpired leases are leases that are still in effect; th	e lease period has not yet ended.
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Part 3: Sign Below		
Under penalty of perjury, I declare that I have indicated no property that is subject to an unexpired lease.	ny intention about any property of my estate that se	cures a debt and any personal
X /s/ Matthew E Grega	X /s/ Joelyn M Grega	
Matthew E Grega Signature of Debtor 1	Joelyn M Grega Signature of Debtor 2	
Date July 25, 2019	Date July 25, 2019	

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Official Form 108

Best Case Bankruptcy

page 2

Statement of Intention for Individuals Filing Under Chapter 7

Fill in this information to identify your case:	Check one box only as directed in this form and in Form
Debtor 1 Matthew E Grega	122A-1Supp:
Debtor 2 (Spouse, if filing) Joelyn M Grega	■ 1. There is no presumption of abuse
United States Bankruptcy Court for the: Northern District of Ohio Case number	2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means Test</i> <i>Calculation</i> (Official Form 122A-2).
(if known)	☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
	☐ Check if this is an amended filing
Official Form 122A - 1	
Chapter 7 Statement of Your Current Monthly	Income 12/15
Be as complete and accurate as possible. If two married people are filing together, both are attach a separate sheet to this form. Include the line number to which the additional inform case number (if known). If you believe that you are exempted from a presumption of abuse qualifying military service, complete and file Statement of Exemption from Presumption of Part 1: Calculate Your Current Monthly Income	nation applies. On the top of any additional pages, write your name and because you do not have primarily consumer debts or because of
What is your marital and filing status? Check one only.	
□ Not married. Fill out Column A, lines 2-11.	
■ Married and your spouse is filing with you. Fill out both Columns A and B	
☐ Married and your spouse is NOT filing with you. You and your spouse a	
Living in the same household and are not legally separated. Fill out bo	oth Columns A and B, lines 2-11.
☐ Living separately or are legally separated. Fill out Column A, lines 2-11: penalty of perjury that you and your spouse are legally separated under n living apart for reasons that do not include evading the Means Test require	nonbankruptcy law that applies or that you and your spouse are
Fill in the average monthly income that you received from all sources, derived during the 101(10A). For example, if you are filing on September 15, the 6-month period would be March the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not spouses own the same rental property, put the income from that property in one column only.	n 1 through August 31. If the amount of your monthly income varied during of include any income amount more than once. For example, if both
	Column A Column B Debtor 1 Debtor 2 or non-filing spouse
Your gross wages, salary, tips, bonuses, overtime, and commissions (before payroll deductions).	\$\$\$2,117.51
Alimony and maintenance payments. Do not include payments from a spouse Column B is filled in.	\$\$1,100.00
4. All amounts from any source which are regularly paid for household expersor of you or your dependents, including child support. Include regular contributions and unmarried partner, members of your household, your dependents, pare and roommates. Include regular contributions from a spouse only if Column B is filled in. Do not include payments you listed on line 3.	ntions
5. Net income from operating a business, profession, or farm Debtor 1	
Gross receipts (before all deductions) \$ 0.00	
Ordinary and necessary operating expenses -\$ 0.00	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

Debtor 1 0.00

0.00 Copy here -> \$

0.00

\$ **-**\$ 0.00 Copy here -> \$

page 1

Best Case Bankruptcy

0.00

0.00

0.00

0.00

0.00

0.00

\$

Net monthly income from a business, profession, or farm \$

6. Net income from rental and other real property

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Case number (if known)

					Column A Debtor 1		Column B Debtor 2 or	
0	I I m a ma				Φ.	0.00	non-filing s	
8.		ployment compensation enter the amount if you contend that the amount	received was a hene	afit under	\$	0.00	\$	0.00
	the So	cial Security Act. Instead, list it here:	received was a bene	in unuci				
	For	you \$	0	.00				
		your spouse \$.00				
	benefi	on or retirement income. Do not include any am under the Social Security Act.			\$	0.00	\$	0.00
10.	Do not receive		security Act or payme nanity, or internationa separate page and p	nts al or	\$	0.00	\$	0.00
		•			\$	0.00	\$	0.00
		Total amounts from separate pages, if any.		- +	\$	0.00	\$	0.00
11.		late your total current monthly income. Add lin olumn. Then add the total for Column A to the total		\$	4,292.65	+ \$_	3,217.51	= \$
						J L		Total current monthly income
Part	2:	Determine Whether the Means Test Applies to	o You					mome
12.	Calcu	ate your current monthly income for the year.	Follow these steps:					
	12a. C	opy your total current monthly income from line 1	1		Сору	y line 11	here=>	\$ 7,510.16 _
	N	lultiply by 12 (the number of months in a year)						x 12
	12b. T	he result is your annual income for this part of the	e form				12b	. \$90,121.92
13.	Calcul	ate the median family income that applies to	you. Follow these ste	ps:				
	Fill in t	he state in which you live.	ОН					
	Fill in t	he number of people in your household.	5					
		he median family income for your state and size						\$98,454.00
		l a list of applicable median income amounts, go form. This list may also be available at the bank		specified i	in the separa	ate instruc	ctions	
14.	How o	lo the lines compare?						
	14a.	Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, c	heck box	1, There is r	no presun	nption of abus	e.
	14b.	☐ Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	f page 1, check box 2	2, The pre	esumption of	abuse is	determined by	y Form 122A-2.
Part	3:	Sign Below						
	В	y signing here, I declare under penalty of perjury	that the information of	n this sta	tement and	in any att	achments is tr	ue and correct.
	X	/s/ Matthew E Grega	X	/s/ Joel	yn M Greg	a		
		Matthew E Grega Signature of Debtor 1			M Grega e of Debtor 2			
	Date	July 25, 2019		July 25,				
	14	MM / DD / YYYY you checked line 14a, do NOT fill out or file Forn		MM / DD	/ YYYY			
	IT	you checked line 14b, fill out Form 122A-2 and fi	IC IL WILLI LIUS TOTTI.					

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

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Matthe	W	Е	Gre	ega
Joelyr	n M	G	reg	a

Case number (if known)	
------------------------	--

Current Monthly Income Details for the Debtor

Debtor Income Details:

Debtor 1 Debtor 2

Income for the Period 01/01/2019 to 06/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Amerathon

Year-to-Date Income:

Total Year-to-Date Income: **\$25,755.91** from check dated **6/30/2019**

Average Monthly Income: **\$4,292.65**.

Debtor 1	Matthew E Grega
Debtor 2	Joelyn M Grega

Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 01/01/2019 to 06/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Progresssive Parma Care

Year-to-Date Income:

Total Year-to-Date Income: \$2,733.00 from check dated 6/30/2019 .

Average Monthly Income: \$455.50 .

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: The Woods on French Creek

Year-to-Date Income:

Total Year-to-Date Income: \$9,972.08 from check dated 5/31/2019.

Average Monthly Income: \$1,662.01.

Line 3 - Alimony and maintenance payments received

Source of Income: Child Support

Constant income of \$1,100.00 per month.

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 4

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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

C	hapter 7:	Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
<u>+</u>	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

	Matthew E Grega		G. N	
In r	^{re} Joelyn M Grega	Debtor(s)	Case No. Chapter	7
		2000(0)	Chapter	<u>.</u>
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR DE	CBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,000.00
	Prior to the filing of this statement I have received		\$	1,000.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the national copy of the agreement.			
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspect	s of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credite d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on home 	tement of affairs and plan which ors and confirmation hearing, and reduce to market value; exc ons as needed; preparation	n may be required; and any adjourned hear emption planning;	rings thereof;
6.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any disany other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of an bankruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
	July 25, 2019	/s/ Peter A. Russ	ell	
j	Date	Peter A. Russell Signature of Attorno Law Office of Pet 10950 Pearl Road Strongsville, OH 440.572.2100 Fa	er A. Russell I, Suite A-2 44136	
		p.russell@sbcglo		
		Name of law firm		

United States Bankruptcy Court Northern District of Ohio

In re	Joelyn M Grega		Case No.	
		Debtor(s)	Chapter	7
	VERIFICATION OF CREDITOR MATRIX			
The ab	ove-named Debtors hereby verify	that the attached list of creditors is true and corr	rect to the best	of their knowledge.
Date:	July 25, 2019	/s/ Matthew E Grega		
		Matthew E Grega		
		Signature of Debtor		
Date:	July 25, 2019	/s/ Joelyn M Grega		
		Joelyn M Grega		
		Signature of Debtor		

Matthew E Grega

ADS PO Box 182789 Columbus, OH 43218

Avant 222 N. Lasalle Steet, Suite 1700 Chicago, IL 60601

Byrider Finance, LLC dba CNAC 12802 Hamilton Crossing Blvd. Carmel, IN 46032

Capital One P.O. Box 71083 Charlotte, NC 28272

Client Services 3451 Harry S. Truman Blvd. Saint Charles, MO 63301

CNAC/IN101 12802 Hamilton Crossing Carmel, IN 46032

Credit Acceptance Corporation 25505 W. 12 Mile Road Southfield, MI 48034

Credit One Bank
P.O. Box 60500
City of Industry, CA 91716

Credit Resource Management 17000 Dallas Pkwy, Suite 204 Dallas, TX 75248

Diversified Consultants 10550 Deerwood Park Blvd. Jacksonville, FL 32225

Fifth Third Bank P.O. Box 630412 Cincinnati, OH 45263

First Federal Credit Control, Inc. 24700 Chagrin Blvd., Suite 205 Beachwood, OH 44122

First Premier Bank P.O. Box 5529 Sioux Falls, SD 57117

FST Financial Bank 363 W. Anchor Drive North Sioux City, SD 57049

Javitch Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114

Jefferson Capital 16 McLeland Road Saint Cloud, MN 56303-2198

LVN Funding c/o 55 Beattie Place Suite 110 Greenville, SC 29601

LVNV Funding 625 Pilot Road, Suite 2/3 Las Vegas, NV 89119

LVNV Funding P.O. Box 740281 Houston, TX 77274

LVNV Funding LLC c/o 55 Beattie Place Suite 110 Greenville, SC 29601

Magis Emergency Medicine LLC P.O. Box 74054 Cleveland, OH 44194-4054

Mariner Finance 25 Ghent Road, Suite 121 Akron, OH 44333 Meade & Associates 737 Enterprise Ave. Lewis Center, OH 43035

Metrohealth P.O. Box 931703 Cleveland, OH 44193-1191

Michael Grega 4232 Arlington Drive Brunswick, OH 44212

Midland Credit Management 8875 Aero Drive San Diego, CA 92123

Midland Funding LLC 2365 Northside Drive, Suite 300 San Diego, CA 92108

National Credit Adjustors 327 W. 4th Save Hutchinson, KS 67501

National Enterprise Systems 2479 Edison Blvd, Unit A Twinsburg, OH 44087

National Payment Center PO Box 790336 Saint Louis, MO 63179

Pendrick Capital Partners c/o Phoenix Financial Services PO Box 361450 Indianapolis, IN 46236

Phoenix Financial Services P.O. Box 361450 Indianapolis, IN 46236

PNC Bank 2730 Liberty Ave. Pittsburgh, PA 15222 Portfolio Recovery 120 Corporate Blvd. Norfolk, VA 23502

Portfolio Recovery 140 Corporate Blvd. Norfolk, VA 23502

Revenue Group 3700 Park East Drive, Suite 240 Beachwood, OH 44122

ROI PO Box 62850 Baltimore, MD 21264

Second Round Sub 1701 Directors Blvd, Suite 900 Austin, TX 78744

Stenger & Stenger 2618 East Paris Ave, SE Grand Rapids, MI 49546

Stenger & Stenger 2618 East Paris Ave., SE Grand Rapids, MI 49546

SYNCB Wall Mart P.O. Box 965036 Orlando, FL 32896

Synchrony Bank Attn: Bankruptcy Dept. P.O. Box 965061 Orlando, FL 32896-5061

TD Bank USA/Target Credit 3701 Wayzata Blvd. Minneapolis, MN 55416

U.S. Dept MOHELA 633 Spirit Drive Chesterfield, MO 63005 U.S. Dept of Education PO Box 790336 Saint Louis, MO 63179

University Hospital PO Box 781988 Detroit, MI 48278

Verizon
P.O. Box 25505
Lehigh Valley, PA 18002-5505

WebBank c/o Advant 640 N. LaSalle St., Ste 535 Chicago, IL 60654

Wells Fargo Dealer Services P.O. Box 25341 Santa Ana, CA 92799-5341